Debtor 1   John Tarry Shoulders   Last Name   Last Name					
Debtor 2   Corinne MicRae Shoulders   Last Name   Last Name   Corinne MicRae Shoulders   East Name   Last Name   L	Fill in	n this inforr	nation to identify your case:		
Debtor 2 Corinne McRae Shoulders   Separate   Ring    Corinne McRae Shoulders   Separate   Ring    Summary of Your Assets   Summary of Your Assets and Liabilities and Certain Statistical Information	Debt	or 1			
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI  Case number    Case number	Debt	or 2	Corinne McRae Shoulders		
Case number   Check if this is an amended filing    Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information   12/15    Bas a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, your wast fill out a new Summary and check the box at the top of this page.  Poilt II: Summarize Your Assets  Your assets   Your	'				
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  20 11 Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Unite	ed States Ba	nkruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI		
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total personal property, from Schedule A/B.  1b. Copy line 62, Total personal property, from Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  2 Summarize Your Liabilities  Your liabilities Amount you own  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.  3 Schedule E/F. Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6 of Schedule E/F.  4 Your total liabilities  Your total liabilities  Your total liabilities  \$ 479,380.27  Part 3. Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106i) Copy your combined monthly income from line 12 of Schedule I.  Schedule I: Your Income (Official Form 106i) Copy your combined monthly income from line 12 of Schedule I.  Schedule I: Your Expenses (Official Form 106i) Copy your monthly expenses from line 22 of Schedule J.  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.	1	_		_	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information in 1 you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part   Summarize Your Assets	(IT KNO)	wn)			
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information in 1 you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part   Summarize Your Assets					
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Your assets  Your assets  Your assets  Your assets  Your bit in the count of the page of page of the page of the page of page of the page of page of the page of					
information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets   Your assets				or si	
Your assets Value of what you own	inforr	mation. Fill	out all of your schedules first; then complete the information on this form. If you are filing amend		
Value of what you own	Part	1: Summ	arize Your Assets	_	
1a. Copy line 55, Total real estate, from Schedule A/B.  1b. Copy line 62, Total personal property, from Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  1c. Copy line 63, Total of Schedule B/F.  1c. Copy line 62, Total of Schedule B/F.  1c. Copy line 63, Total of Schedule B/F.  1c. Copy line 63, Total of Schedule B/F.  1c. Copy					
1c. Copy line 63, Total of all property on Schedule A/B					\$ 280,000.00
Part 2: Summarize Your Liabilities    Your liabilities   Xour liabilities   Your liabilities   Xour liabilit		1b. Copy lin	e 62, Total personal property, from Schedule A/B		\$ 43,375.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 232,541.97  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1c. Copy lin	e 63, Total of all property on Schedule A/B		\$ 323,375.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  \$ 232,541.97  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part 2	2: Summ	arize Your Liabilities		
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  232,541.97  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F					
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F.</i>					\$ 232,541.97
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					\$ 162,636.26
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		3b. Copy th	ne total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$ 84,202.04
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I			Your total liabilities	\$_	479,380.27
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I					
Copy your combined monthly income from line 12 of Schedule I	Part	3: Summ	arize Your Income and Expenses		
Copy your monthly expenses from line 22c of <i>Schedule J</i>					\$ 7,310.47
6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.	5.	Schedule J: Copy your n	Your Expenses (Official Form 106J) nonthly expenses from line 22c of Schedule J		\$
No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.	Part 4	4: Answe	er These Questions for Administrative and Statistical Records		
		-		our ot	her schedules.
7. What kind of debt do you have?	7.	■ Yes What kind	of debt do you have?		
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or				a pe	rsonal, family, or
household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to				o ha-	and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

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Debto	Corinne McRae Shoulders	Case number (if known)	
	from the <i>Statement of Your Current Monthly Income</i> : Co 22A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 I		\$ 6,431.28

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Jon Terry Shoulders

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	162,636.26
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	27,804.18
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	190,440.44

Debt	or 1	Jon Terry Shoulders			
DODE	01 1		e Name Last Name		
Debt		Corinne McRae Shoulders			
Spou	se, if filing)	First Name Middle	e Name Last Name		
Jnite	ed States Banl	kruptcy Court for the: SOUTHER	N DISTRICT OF MISSISSIPPI		
Case	number				☐ Check if this is ar amended filing
		4004/5			
		<u>m 106A/B</u>			
эc	hedule	A/B: Property			12/15
_	No. Go to Part 2 Yes. Where is t				
.1			What is the property? Check all that apply		
.1	Residence	dolo Diany E	What is the property? Check all that apply  Single-family home		d claims or exemptions. Put
.1 -	112 Annand	dale Pkwy E available, or other description		the amount of any sec	d claims or exemptions. Put ured claims on <i>Schedule D:</i> Claims Secured by Property.
.1	112 Annand	<b>-</b>	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any sec Creditors Who Have C	ured claims on Śchedule D: Claims Secured by Property.
.1	112 Annand	<b>-</b>	Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any sec	ured claims on Schedule D: Claims Secured by Property.  Current value of the portion you own?
.1	112 Annand Street address, if	available, or other description	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property	the amount of any sec Creditors Who Have C	ured claims on Schedule D: Claims Secured by Property.  Current value of the portion you own?
-	112 Annand Street address, if	available, or other description  MS 39110-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare	Current value of the entire property? \$280,000.00	Current value of the portion you own?  \$280,000.00  To your ownership interest
-	112 Annand Street address, if	available, or other description  MS 39110-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare  Other	Current value of the entire property? \$280,000.00	Current value of the portion you own?  23 \$280,000.00  25 your ownership interest tenancy by the entireties, or
-	112 Annand Street address, if	available, or other description  MS 39110-0000	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property  Timeshare	Current value of the entire property? \$280,000.00  Describe the nature of (such as fee simple,	Current value of the portion you own?  23 \$280,000.00  25 your ownership interest tenancy by the entireties, or
-	112 Annand Street address, if	available, or other description  MS 39110-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one	Current value of the entire property? \$280,000.00  Describe the nature of (such as fee simple,	Current value of the portion you own?  23 \$280,000.00  25 your ownership interest tenancy by the entireties, or
-	112 Annand Street address, if a Madison City	available, or other description  MS 39110-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$280,000.00  Describe the nature (such as fee simple, a life estate), if know	Current value of the portion you own?  Says your ownership interest tenancy by the entireties, or n.
-	112 Annand Street address, if a  Madison  City  Madison	available, or other description  MS 39110-0000	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$280,000.00  Describe the nature of (such as fee simple, a life estate), if know	Current value of the portion you own?  \$\frac{0}{2}   \q

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

ebtor 2 (	Jon Terry Shoulders Corinne McRae Shoulders	Ca	se number (if known)	
Cars, vans	s, trucks, tractors, sport utility ve	hicles, motorcycles		
□ No				
■ Yes				
			Do not deduct secured cl	laima ar avamatiana. But
3.1 Make:	Honda	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
Model:	Accord	☐ Debtor 1 only	Creditors Who Have Clair	ims Secured by Property.
Year:	2015 mate mileage: 41,000	Debtor 2 only	Current value of the	Current value of the
	mate mileage: 41,000	■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	entire property?	portion you own?
	iomaion.	At least one of the deptors and another		
		Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
3.2 Make:	Honda	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	Accura RL	Debtor 1 only	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.
Year:	2010	Debtor 2 only		
Approxi	mate mileage: 105,000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other in	nformation:	☐ At least one of the debtors and another		
			\$10,000.00	\$10,000.00
		Check if this is community property (see instructions)  and other recreational vehicles, other vehicles, and atercraft, fishing vessels, snowmobiles, motorcycle and other recreational vehicles, and other vehicles, and other recreational vehicles, other vehicles, and	d accessories	
Examples: E  No Yes  Add the de	Soats, trailers, motors, personal wa	(see instructions)  and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of the control of t	d accessories accessories	\$25,000,00
Examples: E  No Yes  Add the de	Soats, trailers, motors, personal wa	(see instructions)  and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle a	d accessories accessories	\$25,000.00
No ☐ Yes  Add the depages your art 3: Description	Soats, trailers, motors, personal was ollar value of the portion you ow have attached for Part 2. Write the Your Personal and Household It	(see instructions)  Ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including an that number here	d accessories ccessories  by entries for	
No ☐ Yes  Add the depages your art 3: Description	Soats, trailers, motors, personal was ollar value of the portion you ow have attached for Part 2. Write the Your Personal and Household It	(see instructions)  nd other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including an that number here	d accessories ccessories  by entries for	\$25,000.00  Current value of the portion you own?  Do not deduct secured claims or exemptions.
No Yes  Add the depages you art 3: Describe you own	Soats, trailers, motors, personal was ollar value of the portion you ow have attached for Part 2. Write the Your Personal and Household It	(see instructions)  Ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including an that number hereems  ems  terest in any of the following items?	d accessories ccessories  by entries for	Current value of the portion you own? Do not deduct secured
No Yes  Add the depages you art 3: Describe you own	ollar value of the portion you ow have attached for Part 2. Write the Your Personal and Household It or have any legal or equitable in goods and furnishings.  Major appliances, furniture, linens	(see instructions)  Ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including an that number hereems  ems  terest in any of the following items?	d accessories ccessories  by entries for	Current value of the portion you own? Do not deduct secured
No N	ollar value of the portion you ow have attached for Part 2. Write the Your Personal and Household It or have any legal or equitable in goods and furnishings.  Major appliances, furniture, linens	ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including and that number here	d accessories ccessories  by entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
Add the danges you art 3: Describe you own thousehold Examples:  No Yes. Describe you own thousehold Examples: No Yes. Describe you own thousehold Examples:	ollar value of the portion you ow have attached for Part 2. Write tibe Your Personal and Household It or have any legal or equitable in Major appliances, furniture, linens escribe  Household Goods  Televisions and radios; audio, vidincluding cell phones, cameras, n	(see instructions)  Ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including and that number here	d accessories accessories ay entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.
No □ Yes  Add the do pages you art 3: Describe you own  Household Examples: □ No ■ Yes. De  Electronic: Examples:	ollar value of the portion you ow have attached for Part 2. Write tibe Your Personal and Household It or have any legal or equitable in Major appliances, furniture, linens escribe  Household Goods  Televisions and radios; audio, vidincluding cell phones, cameras, n	(see instructions)  Ind other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft, fishing vessels, snowmobiles, motorcycle attercraft and that number here	d accessories accessories ay entries for	Current value of the portion you own? Do not deduct secured claims or exemptions.

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

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	btor 1 btor 2	Jon Terry St Corinne McF	houlders Rae Shoulders		Case number (if known)	
	□ Yes.	Describe				
		ent for sports al les: Sports, photo musical instru	graphic, exercise, and other hob	by equipment; bicycles, pool tables,	golf clubs, skis; canoes a	nd kayaks; carpentry tools;
	☐ Yes.	Describe				
	■ No		s, shotguns, ammunition, and rel	ated equipment		
	□ No Î	oles: Everyday cl	othes, furs, leather coats, design	er wear, shoes, accessories		
	■ Yes.	Describe	Wearing Apparel			\$200.00
	□ No		welry, costume jewelry, engager	nent rings, wedding rings, heirloom je	ewelry, watches, gems, go	old, silver
			Jewelry			\$4,500.00
	<i>Examp</i> □ No -	rm animals oles: Dogs, cats, Describe	birds, horses			
			1 dog			\$100.00
15	■ No □ Yes.  Add to	Give specific inf the dollar value art 3. Write that	ormation  of all of your entries from Part number here	t already list, including any health  3, including any entries for pages	Γ	\$16,800.00
		scribe Your Finan	cial Assets egal or equitable interest in an	y of the following?		Current value of the
DO	you ow	vn or nave any i	egai or equitable interest in an	y of the following?		portion you own?  Do not deduct secured claims or exemptions.
	No		have in your wallet, in your home	e, in a safe deposit box, and on hand	when you file your petitio	n
	Examp		avings, or other financial accoun If you have multiple accounts wi	ts; certificates of deposit; shares in c th the same institution, list each.	credit unions, brokerage h	ouses, and other similar
	□ No ■ Yes			Institution name:		

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Debtor 2	,				Case number (if known)	
		17.1.	Checking	Regions		\$0.00
		17.2.	Checking	Regions		\$0.00
		17.3.	Checking	Trustmark		\$1,015.00
Exa ■ No	)			okerage firms, money marke	et accounts	
19. <b>Non</b>	t venture	ock and			d businesses, including an interest in an LL	₋C, partnership, and
			about themme of entity:		% of ownership:	
Non  ■ Non □ Ye  21. Reti	n-negotiable instruments s. Give specific informent or pension imples: Interests in II	ents are rmation a lss	those you cannot tra about them uer name:	shiers' checks, promissory n insfer to someone by signing the signing		
_	es. List each account		tely. of account:	Institution name:		
		401(i		401(k)		\$560.00
You Exa ■ No	mples: Agreements	d deposi	ts you have made so	that you may continue serve public utilities (electric, gas, Institution name or in	water), telecommunications companies, or other	hers
23. <b>Ann</b> ■ No	•	r a perio	dic payment of mone	ey to you, either for life or fo	r a number of years)	
		suer nam	e and description.			
	.S.C. §§ 530(b)(1), 5	,		ualified ABLE program, o	r under a qualified state tuition program.	
		stitution r	name and description	n. Separately file the records	s of any interests.11 U.S.C. § 521(c):	
■ No	•			ther than anything listed i	in line 1), and rights or powers exercisable	for your benefit
Exa ■ No	mples: Internet dom	ain nam	es, websites, procee	nd other intellectual prope ds from royalties and licens		

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	ebtor 1 ebtor 2	Jon Terry Shoulders Corinne McRae Shoulders	Case number (if known)	
27.		es, franchises, and other general intangibles		
	Examp  ■ No	les: Building permits, exclusive licenses, cooperative associati	on holdings, liquor licenses, professional licens	es
		Give specific information about them		
Mo	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including whether you all	ready filed the returns and the tax years	
			caay mee and returns and and tax years	
	_ '	support les: Past due or lump sum alimony, spousal support, child sup	port, maintenance, divorce settlement, property	settlement
	■ No □ Yes. 0	Give specific information		
30.	Examp	mounts someone owes you  les: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else	enefits, sick pay, vacation pay, workers' compe	nsation, Social Security
	■ No □ Yes.	Give specific information		
		s in insurance policies les: Health, disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
	Yes. N	Name the insurance company of each policy and list its value.	5	
		Company name:	Beneficiary:	Surrender or refund value:
		Forrester Life Insurance-Term		\$0.00
		USAA Life Insurance-term		\$0.00
32.	If you a	erest in property that is due you from someone who has due the beneficiary of a living trust, expect proceeds from a life the has died.		eive property because
	■ No			
	⊔ Yes.	Give specific information		
		against third parties, whether or not you have filed a laws les: Accidents, employment disputes, insurance claims, or righ		
		Describe each claim		
34.	_	ontingent and unliquidated claims of every nature, includi	ng counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim		
		ancial assets you did not already list		
	■ No			
	☐ Yes.	Give specific information		
36		ne dollar value of all of your entries from Part 4, including rt 4. Write that number here		\$1,575.00

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Debtor 1 Debtor 2	Jon Terry Shoulders Corinne McRae Shoulders		Case number (if known)	
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. <b>Do yo</b>	u own or have any legal or equitable interest in any business-relat	ted property?		
■ No.	Go to Part 6.			
☐ Yes.	Go to line 38.			
	Describe Any Farm- and Commercial Fishing-Related Property You fyou own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. <b>Do y</b>	ou own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
•	o. Go to Part 7.			
_	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You have other property of any kind you did not already list			
	mples: Season tickets, country club membership			
■ No				
☐ Ye	s. Give specific information			
54. <b>Ad</b>	d the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Par</b>	t 1: Total real estate, line 2			\$280,000.00
56. <b>Par</b>	t 2: Total vehicles, line 5	\$25,000.00		
57. <b>Par</b>	t 3: Total personal and household items, line 15	\$16,800.00		
58. <b>Par</b>	t 4: Total financial assets, line 36	\$1,575.00		
59. <b>Par</b>	t 5: Total business-related property, line 45	\$0.00		
60. <b>Par</b>	t 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Par</b>	t 7: Total other property not listed, line 54	\$0.00		
62. <b>Tot</b>	al personal property. Add lines 56 through 61	\$43,375.00	Copy personal property total	\$43,375.00
63. <b>Tot</b>	al of all property on Schedule A/B. Add line 55 + line 62			\$323,375.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Jon Terry Should	lers		
	First Name	Middle Name	Last Name	
Debtor 2	Corinne McRae S	Shoulders		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Copy the value from Check only one box for each exemption.		Specific laws that allow exemption
	Copy the value from Schedule A/B			
Household Goods Line from Schedule A/B: 6.1	\$11,000.00	•	\$11,000.00	Miss. Code Ann. § 85-3-1(a)
Ellio Holli Goriodale 772. GT			100% of fair market value, up to any applicable statutory limit	
T.v.'s, computers and phones Line from Schedule A/B: 7.1	\$1,000.00		\$1,000.00	Miss. Code Ann. § 85-3-1(a)
Line Holli Schedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit	
Wearing Apparel Line from Schedule A/B: 11.1	\$200.00		\$200.00	Miss. Code Ann. § 85-3-1(a)
Line Holli Schedule A/D. 1111			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$4,500.00		\$4,500.00	Miss. Code Ann. § 85-3-1(a)
Line Holli Schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	
1 dog Line from Schedule A/B: 13.1	\$100.00		\$100.00	Miss. Code Ann. § 85-3-1(a)
Line nom <i>Schedule A/D</i> . 13.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 2		n Terry Shoulders rinne McRae Shoulders			Case number (if known)	
		ription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	٠,	<b>101(k)</b> Schedule A/B: <b>21.1</b>	\$560.00		\$560.00	Miss. Code Ann. § 85-3-1(e)
LIII	e nom	Schedule A/D. 21.1			100% of fair market value, up to any applicable statutory limit	
	•	claiming a homestead exemption o adjustment on 4/01/22 and every			ed on or after the date of adjustme	nt.)
	Yes.	Did you acquire the property cover	ed by the exemption wi	thin 1	215 days before you filed this case	?
		No				
		Yes				

Debtor 2 Corinne MRRae Shoulders Speans it, ling   Corinne MRRae Shoulders First Name   SOUTHERN DISTRICT OF MISSISSIPPI      Check if this is an amended filing	Fill in this informa	ation to identify you	r case:			
Debtor 2   Corinne McRae Shoulders   Notice Name   Last Name   Last Name	Debtor 1	Jon Terry Shoul	ders			
United States Bahruptory Court for the:  SOUTHERN DISTRICT OF MISSISSIPPI  Cases number If worway  Difficial Form 106D  Schedule D: Creditors Who Have Claims Secured by Property  12/15  Is as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space in needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case unber (if known).  Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Ves. Fill in all of the information below.  List All Secured Claims  List All Secured Claims  List all Secured Claims.  List all Secured claims. If a grotiler has none intention rise a particular dam, fill the claim. If more than one certific has a particular dam, fill the claim in aphabetelated norder according to the creditors in Fair 2. As Do not deduct for data according to the creditor in Fair 2. As Do not deduct and the claims is a particular dam, fill the claim is check all that apply.  P.O. Box 98774  Phoenix, AZ 85038  Number. Silver, Gissue & Zio Cote  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  Debtor 1 and Debtor 2 only  A of the debt you file, the claim is: Check all that apply.  Contingent  Last 4 digits of account number  Debtor 1 and Debtor 2 only  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply.  A of the debt you file, the claim is: Check all that apply		First Name	Middle Name Last Name			
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Difficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property  12/15  It is a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space inseeded, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case under (in known).  Do any creditors have claims secured by yeur property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes, Fill in all of the information below.  Let all secured Claims.  Let All Secured Claims.  Let All Secured Claims.  Describe the property that secures the claim: in Part 2. As mount of claim much as possible, list the claims in alphabetical order according to the creditor's name.  2.1 CPS  Describe the property that secures the claim:  2.1 CPS  Describe the property that secures the claim:  2.1 CPS  Describe the property that secures the claim:  2.1 CPS  Describe the property that secures the claim:  2.2 Credit Acceptance  Debtor 1 and Debtor 2 only  As of the date you file, the claim is: Check all that apply.  Nature of lien. Check all that apply.  As a fire date you file, the claim is: Check all that apply.  As a fire date of the debtors and another check if this claim relates to a community debt  Debtor 1 and Debtor 2 only  Check if this claim relates to a community debt  Describe the property that secures the claim:  2.2 Credit Acceptance  Describe the property that secures the claim:  2.3 13,000.00  \$13,000.00  \$15,000.00  \$100.00  \$100.00  \$15,000.00  \$15,000.00  \$100.00  \$100.00  \$15,000.00  \$1	(if known)				☐ Check	if this is an
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■ Yes. Fill in all of the information below.    Column A	1. Do any creditors h	ave claims secured by	your property?			
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Phoenix, AZ 85038   Number, Street, City, State & Zip Code   Unliquidated   Disputed   Nature of lien. Check all that apply.			As of the date you file, the claim is: Check all that			
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Check if this claim relates to a community debt  Date debt was incurred  Last 4 digits of account number  2.2 Credit Acceptance Creditor's Name  Describe the property that secures the claim: \$13,000.00 \$15,000.00 \$0.00  P.O. Box 551888 Detroit, MI 48255 Number, Street, City, State & Zip Code Who owes the debt? Check one.  Describe the property that secures the claim: \$13,000.00 \$15,000.00 \$0.00  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another  Other (including a right to offset)  Last 4 digits of account number  \$13,000.00 \$15,000.00 \$0.00  \$0.00	■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
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Last 4 digits of account number    Credit Acceptance	☐ Check if this clai	im relates to a	Other (including a right to offset)			
Credit Acceptance Creditor's Name  Describe the property that secures the claim:  2015 Honda Accord 41,000 miles  P.O. Box 551888 Detroit, MI 48255 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Describe the property that secures the claim: \$13,000.00 \$15,000.00 \$0.0	community deb	t				
P.O. Box 551888 Detroit, MI 48255 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another	Date debt was incur	rred	Last 4 digits of account number			
P.O. Box 551888 Detroit, MI 48255  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only  As of the date you file, the claim is: Check all that apply.  Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit	2.2 Credit Acc	eptance	Describe the property that secures the claim:	\$13,000.00	\$15,000.00	\$0.00
P.O. Box 551888 Detroit, MI 48255    Contingent     Unliquidated     Disputed     Debtor 1 only     Debtor 2 only     Debtor 1 and Debtor 2 only     Debtor 1 and Debtor 2 only     At least one of the debtors and another     At least one of the debtors and another     Apply.     Contingent     Unliquidated     Disputed     Nature of lien. Check all that apply.     An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit	Creditor's Name		2015 Honda Accord 41,000 miles			
P.O. Box 551888 Detroit, MI 48255    Contingent     Unliquidated     Disputed     Debtor 1 only     Debtor 2 only     Debtor 1 and Debtor 2 only     Debtor 1 and Debtor 2 only     At least one of the debtors and another     At least one of the debtors and another     Apply.     Contingent     Unliquidated     Disputed     Nature of lien. Check all that apply.     An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit						
Detroit, MI 48255    Contingent   Contingent	D O D . 5	F4000	As of the date you file, the claim is: Check all that			
Number, Street, City, State & Zip Code  Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only  At least one of the debtors and another  Unliquidated Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit						
Who owes the debt? Check one.  Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit						
Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  At least one of the debtors and another  Judgment lien from a lawsuit	Number, Street, 0	City, State & Zip Code	· · · · · · · · · · · · · · · · · · ·			
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ An agreement you made (such as mortgage or secured car loan) □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit	Who owes the deb	it? Check one				
□ Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit	_	5.1001.0110.	_	agurad		
■ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit	,			ecurea		
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit	_	otor 2 only	_ ′			
_	_	=				
			☐ Other (including a right to offset)			
community debt						
Date debt was incurred Last 4 digits of account number 4584	Date deht was incur	rred	Last 4 digits of account number 4594			

Official Form 106D

Debtor 1 Jon Terry Shoulders		Case number (if known)		
First Name Middle N				
Debtor 2 Corinne McRae Should First Name Middle N				
First Name Middle N	lame Last Name			
2.3 Regions	Describe the property that secures the claim:	\$3,590.99	\$280,000.00	\$0.00
Creditor's Name	Residence 112 Annandale Pkwy E			
	Madison, MS 39110 Madison			
	County			
	HELOC As of the date you file, the claim is: Check all that	_		
P.O. Box 2224	apply.			
Birmingham, AL 35246	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)	,		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community desi				
Date debt was incurred	Last 4 digits of account number 672	3		
	Describe the property that secures the claim:	¢204 E40 02	\$280,000.00	\$0.00
2.4 Specialized Loan Serv.	Describe the property that secures the claim.	\$201,518.93	Ψ200,000.00	Ψ0.00
Creditor's Name	Residence 112 Annandale Pkwy E	\$201,516.93	Ψ200,000.00	Ψ0.00
	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison	\$201,516.95	Ψ200,000.00	Ψ0.00
	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County		Ψ250,000.00	Ψ0.00
P.O. Box 60535 City of Industry, CA	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison		Ψ250,000.00	Ψ0.00
Creditor's Name  P.O. Box 60535	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that		Ψ250,000.00	ψ0.00
P.O. Box 60535 City of Industry, CA	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.		Ψ250,000.00	40.00
P.O. Box 60535 City of Industry, CA 91716 Number, Street, City, State & Zip Code	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed		Ψ250,000.00	40.00
P.O. Box 60535 City of Industry, CA 91716	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated		Ψ250,000.00	40.00
P.O. Box 60535 City of Industry, CA 91716 Number, Street, City, State & Zip Code	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed		Ψ250,000.00	40.00
P.O. Box 60535 City of Industry, CA 91716 Number, Street, City, State & Zip Code  Who owes the debt? Check one.	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.		Ψ250,000.00	40.00
P.O. Box 60535 City of Industry, CA 91716 Number, Street, City, State & Zip Code  Who owes the debt? Check one.	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or	secured	Ψ250,000.00	40.00
Creditor's Name  P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan)	secured	Ψ250,000.00	40.00
Creditor's Name  P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien	secured	Ψ230,000.00	45.00
Creditor's Name  P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit	secured	ψ250,000.00	45.00
Creditor's Name  P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit	secured	ψ250,000.00	<b>45.00</b>
Creditor's Name  P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another Check if this claim relates to a community debt	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit Other (including a right to offset)	secured	Ψ230,000.00	<b>40.00</b>
P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	secured )		45.00
P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Add the dollar value of your entries in Clif this is the last page of your form, add	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	secured ) \$232,541.9	07	<b>40.00</b>
P.O. Box 60535 City of Industry, CA 91716  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Date debt was incurred  Add the dollar value of your entries in Community and community debt	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison County  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number	secured )	07	<b>40.00</b>

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	rmation to identify your ca	ise.				
Debtor 1	Jon Terry Shoulder First Name	<b>'S</b> Middle Name Last Nam	ne			
Debtor 2	Corinne McRae Sho					
(Spouse if, filing)	First Name	Middle Name Last Nam	ie			
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT OF MISSISSIPP	기			
Case number						
(if known)					☐ Check	if this is an
					ameno	ded filing
Official For	m 106E/E					
Official For		a Haya Haaaayyad Claim	_			40/45
		no Have Unsecured Claim Part 1 for creditors with PRIORITY claims a				12/15
Schedule D: Cred left. Attach the Co name and case no	itors Who Have Claims Secur ontinuation Page to this page. umber (if known).	ed Leases (Official Form 106G). Do not incled by Property. If more space is needed, could be used to the property of the prope	opy the Part	you need, fill it out,	number the entries i	in the boxes on the
	All of Your PRIORITY Unse					
_ `	tors have priority unsecured o	claims against you?				
☐ No. Go to	Part 2.					
identify what t possible, list t Part 1. If more	ype of claim it is. If a claim has he claims in alphabetical order a e than one creditor holds a parti	If a creditor has more than one priority unsecu- both priority and nonpriority amounts, list that according to the creditor's name. If you have r cular claim, list the other creditors in Part 3.	claim here a nore than tw	nd show both priority a	and nonpriority amoun	its. As much as
					amount	amount
2.1 IRS		Look 4 digito of account growther		\$156,036.0 7	\$156,036.07	\$0.00
	Creditor's Name	Last 4 digits of account number			- +100,000.01	
_	ox 7346 elphia, PA 19101	When was the debt incurred?	2011,20 015	012,2013,2014,2	_	
	Street City State Zip Code	As of the date you file, the claim	ı is: Check a	all that apply		
Who incurr	ed the debt? Check one.	☐ Contingent				
■ Debtor 1	only	☐ Unliquidated				
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least of	one of the debtors and another	☐ Domestic support obligations				
☐ Check if	this claim is for a community	y debt Taxes and certain other debts	you owe the	government		
	subject to offset?	☐ Claims for death or personal in	•	•		
■ No		Other. Specify				
☐ Yes						•

Debtor 2	Jon Terry Shoulders Corinne McRae Shoulders		Case nur	mber (if known)		
2.2	IRS	Last 4 digits of account number		\$6,600.19	\$6,600.19	\$0.00
	Priority Creditor's Name P.O. Box 7346 Philadelphia, PA 19101	When was the debt incurred?	2016			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
Wh	o incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
	At least one of the debtors and another	☐ Domestic support obligations				
ls t ■	Check if this claim is for a community debt he claim subject to offset? No Yes	■ Taxes and certain other debts □ Claims for death or personal in □ Other. Specify	ury while you			
4. List	all of your nonpriority unsecured claims in the cured claim, list the creditor separately for each clone creditor holds a particular claim, list the other	alphabetical order of the creditor aim. For each claim listed, identify w	<b>who holds ea</b> nat type of clai	im it is. Do not list claims	s already included in P is fill out the Continuat	art 1. If more ion Page of
					Total cl	aim
	Ally Nonpriority Creditor's Name P.O. Box 380902 Minneapolis, MN 55438 Number Street City State Zip Code	Last 4 digits of account numb When was the debt incurred?  As of the date you file, the cla		all that apply		\$15,000.00
	Who incurred the debt? Check one.	,	0	an mar apply		
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a	separation agre	eement or divorce that y	ou did not	
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sh	aring plans, a	nd other similar debts		
	☐ Yes	Other. Specify				

	Debtor 1 Jon Terry Shoulders Debtor 2 Corinne McRae Shoulders Case number (if known)		
4.2	Amercian Express Cust.	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name P.O. Box 981535 El Paso. TX 79998	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	American Express Nat'l Nonpriority Creditor's Name	Last 4 digits of account number	Unknown
	P.O. Box 30384 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	_	
	<b>1</b> 163	Other. Specify	
4.4	Audi Financial Service	Last 4 digits of account number 8631	\$11,720.44
	Nonpriority Creditor's Name c/o. Vital Recovery S. P.O. Box 923747	When was the debt incurred?	
	Peachtree, GA 30010-3747		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other, Specify Deficiency on vehicle	

	or 2 Corinne McRae Shoulders	Case number (if known)			
4.5	Chase Bank	Last 4 digits of account number 2056	\$4,914.24		
	Nonpriority Creditor's Name c/o ARS National Serv. P.O. Box 469046	When was the debt incurred?			
	Escondido, CA 92046				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	□ Yes				
	☐ Yes	Other. Specify			
4.6	Comenity/Lexus Pursuit Nonpriority Creditor's Name	Last 4 digits of account number	\$453.07		
	P.O. Box 659820 San Antonio, TX 78265	When was the debt incurred?			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	_ `			
	•	☐ Disputed  Type of NONPRIORITY unsecured claim:			
	At least one of the debtors and another	Student loans			
	☐ Check if this claim is for a community debt				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.7	Credit One bank	Last 4 digits of account number 9411	\$521.48		
	Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred?	<b>,,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	City of Industry, CA 91716				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
		<u> </u>			
	□Yes	Other Specify			

	1 Jon Terry Shoulders 2 Corinne McRae Shoulders	Case number (if known)	
4.8	Genesis FS Card Servic	Last 4 digits of account number 8676	\$329.30
	Nonpriority Creditor's Name P.O. Box 23039 Columbus, GA 31902	When was the debt incurred?	·
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.9	Jackson Anestheisa	Last 4 digits of account number	\$1,197.00
	Nonpriority Creditor's Name P.O. Box 2398	When was the debt incurred?	
	Jackson, MS 39225		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
41			
0	Merit Health River Oak  Nonpriority Creditor's Name	Last 4 digits of account number 8062	\$1,985.20
	1030 River Oaks Drive Flowood, MS 39232	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

	Debtor 1 Jon Terry Shoulders  Debtor 2 Corinne McRae Shoulders  Case number (if known)			
4.1	MS Vein Institute	Last 4 digits of account number 2125	\$1,009.72	
	Nonpriority Creditor's Name 111 Fountains Blvd	When was the debt incurred?		
	Madison, MS 39110  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	□ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		
4.1	Navient	Last 4 digits of account number 4735	\$27,804.18	
	Nonpriority Creditor's Name P.O. Box 9000 Wilkes Barre, PA 18773	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.1 3	PayPal Credit	Last 4 digits of account number 8506	\$1,470.75	
	Nonpriority Creditor's Name P.O. Box 71202 Charlotte, NC 28272	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify		

	1 Jon Terry Shoulders 2 Corinne McRae Shoulders	Case number (if known)			
4.1	Regions	Last 4 digits of account number 0918	\$1,045.39		
<b>-</b>	Nonpriority Creditor's Name Consumer Loan Processi P.O. Box 2224	When was the debt incurred?	· ,		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1 5	USAA Savings Bank	Last 4 digits of account number 6361	\$3,731.52		
	Nonpriority Creditor's Name c/o Radius Global P.O. Box 390846	When was the debt incurred?			
	Minneapolis, MN 55439  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1 6	Watkins Const. & Roof  Nonpriority Creditor's Name	Last 4 digits of account number	\$13,019.75		
	c/o Simpson Law Firm P.O. Box 1410 Ridgeland, MS 39158	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Jon Terry Shoulders Corinne McRae Shoulders		Case number (if known)		
is trying to collect from you for a debt you owe	e to someone else, list the original cred ots that you listed in Parts 1 or 2, list th	that you already listed in Parts 1 or 2. For example, if a collection agency ditor in Parts 1 or 2, then list the collection agency here. Similarly, if you e additional creditors here. If you do not have additional persons to be		
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?		
Ally	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
P.O. Box 9001951 Louisville, KY 40290		■ Part 2: Creditors with Nonpriority Unsecured Claims		
Louisville, KT 40290	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 c	did you list the original creditor?		
IRS	Line <b>2.1</b> of (Check one):	■ Part 1: Creditors with Priority Unsecured Claims		
c/o Tabitha Bandi 501 E. Court St S4.430 Jackson, MS 39201		☐ Part 2: Creditors with Nonpriority Unsecured Claims		
daskeen, me eezer	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 c	did you list the original creditor?		
Navient	Line <b>4.12</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims		
c/o Tabitha Bandi 501 E. Court St S4.430 Jackson, MS 39201		■ Part 2: Creditors with Nonpriority Unsecured Claims		
daskeen, me eezer	Last 4 digits of account number			
Name and Address	On which entry in Part 1 or Part 2 c	did you list the original creditor?		
VW Credit, Inc.	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims		
Asset Resolution P.O. Box 7572 Libertyville, IL 60048		Part 2: Creditors with Nonpriority Unsecured Claims		
Liberty ville, IL 00046	Last 4 digits of account number			

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	œ	400 000 00
IIOIII Fait I		•		\$	162,636.26
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	162,636.26
					Total Claim
Total	6f.	Student loans	6f.	\$	27,804.18
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	56,397.86
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	84,202.04

Fill in this information to identify your case:					
Debtor 1	Jon Terry Should	ers			
	First Name	Middle Name	Last Name		
Debtor 2	Corinne McRae S	houlders			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					☐ Check if this is an amended filing

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIP Code	
2.0	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	Oity		Olalo	211 0000	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	

Fill in this	s information to identify your	case:			
Debtor 1	Jon Terry Should	ders			
<b>5</b> 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) Corinne McRae S	Shoulders  Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	T OF MISSISSIPPI		
Case num	ber				
(if known)					Check if this is an amended filing
	l Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
Arizor  No. Yes  3. In Colin line Form	shin the last 8 years, have young, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spourment of the second of the seco	, Nevada, New Mexico, Pໍ່ເ use, or legal equivalent liv tors. Do not include your if that person is a guarar	e with you at the time?  r spouse as a codebtor or cosigner. Make	ington, and Wisconsin.)  if your spouse is filingure you have listed the	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
2.1				Cohodula D. lin	•
3.1	Name				
				☐ Schedule G, lin	
-	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
0.2	Name			Schedule E/F, I	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

Fill in this information	to identify your case:	
Debtor 1	Jon Terry Shoulders	_
Debtor 2 (Spouse, if filing)	Corinne McRae Shoulders	_
United States Bankrup	otcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	_
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:  MM / DD/ YYYY

### Official Form 1061

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ☐ Not employed ■ Not employed information about additional employers. Occupation **Sales Advisor** e commerce manager Include part-time, seasonal, or Cotton Blossom Farm Crafts & self-employed work. Lexus Employer's name Fabrics, LL Occupation may include student or homemaker, if it applies. **Employer's address High Street Hwy 51** Jackson, MS 39202 Ridgeland, MS 39157 How long employed there? 11 months 6 years

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			F	For Debtor 1		Debtor 2 or filing spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	1,863.24	\$	2,411.97
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	1,863.24	\$	2,411.97

Schedule I: Your Income Official Form 106I page 1

**Jon Terry Shoulders** Debtor 1 **Corinne McRae Shoulders** Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 1.863.24 2,411.97 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 261.97 297.94 5b. Mandatory contributions for retirement plans 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 112.33 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 0.00 5e. Insurance 5e. 171.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5g. 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 545.30 297.94 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 1,317.94 2,114.03 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 0.00 8b. Interest and dividends 8h 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 1,722.50 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 2,156.00 \$ 0.00 Other monthly income. Specify: 8h.+ 8h. \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 3,878.50 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 7.310.47 5.196.44 2.114.03 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 7,310.47 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. п Yes. Explain: Mr. Shoulder's income is commission based.

Eill i	n this informa	ation to identify yo	our case:							
		ation to identity ye	our case.							
Debt	or 1	Jon Terry Sh	oulders			_		f this is:		
Debt	or 2	Corinne McF	Pao Shou	ldars				amended filing	ving postpetition cha	nter
	use, if filing)	COMMINE WICH	tae Silou	iucis					the following date:	ptoi
Unite	ed States Bankı	ruptcy Court for the	: SOUTH	ERN DISTRICT OF MISS	ISSIPPI		MN	M / DD / YYYY		
Case	e numbe <b>r</b>									
(If kn	nown)									
Of	ficial Fo	rm 106J								
		J: Your	Evner	202						12/15
				If two married people ar	e filing together, be	oth are ed	ıuallv	responsible fo	r supplying correc	
info	rmation. If m		eded, atta	ch another sheet to this						
Part	1: Desci	ribe Your House	hold							
1.	Is this a joir									
	☐ No. Go to	o line 2.								
	Yes. Doe	es Debtor 2 live i	in a separa	ate household?						
	■ N	lo								
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor	2.		
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents								☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	Do your exp	penses include		No			_		<b>□</b> 163	
	•	of people other the	han $_{m \Box}$	Yes						
	yourself an	d your depende	nts? —	100						
Part		nate Your Ongoi								
exp	mate your ex enses as of a licable date.	a date after the l	our bankrı bankruptc	uptcy filing date unless y y is filed. If this is a supp	ou are using this following the following th	orm as a : J, check	supp the b	lement in a Cha box at the top of	pter 13 case to rep the form and fill in	ort n the
Incl	ude expense	es paid for with i	non-cash	government assistance i	f vou know					
				luded it on Schedule I: Y				V		
(Off	icial Form 10	D6I.)						Your expe	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$		1,429.50	
	. ,	ded in line 4:	J :				_			
							Φ.			
		estate taxes	or rooter	'e incuranco		4a. 4b.			0.00	
		erty, homeowner's e maintenance, re				4b. 4c.	· : —		0.00	
		eowner's associat	•			4d.	· : —		0.00	
5.				our residence, such as ho	me equity loans		\$		0.00	

	otor 1 otor 2		ry Shoulders McRae Shoulders	Case num	nber (if known)	
6.	Utilit	ies:				
	6a.	Electricity	, heat, natural gas	6a.	\$	300.00
	6b.		wer, garbage collection	6b.	\$	65.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	414.50
	6d.	Other. Spe	ecify:	6d.	\$	0.00
7.	Food	d and hous	ekeeping supplies	7.	\$	600.00
8.	Child	dcare and o	children's education costs	8.	\$	0.00
9.	Cloth	hing, laund	Iry, and dry cleaning	9.	\$	0.00
10.	Pers	onal care p	products and services	10.	\$	60.00
11.	Medi	ical and de	ntal expenses	11.	\$	175.00
12.	Tran	sportation.	Include gas, maintenance, bus or train fare.	40	Ф.	195.00
4.0	Do no	ot include c	ar payments.	12.		
			clubs, recreation, newspapers, magazines, and book			0.00
			tributions and religious donations	14.	\$	0.00
15.		rance.	source and dusted from your pay or included in lines 4 or	20		
		Life insura	nsurance deducted from your pay or included in lines 4 or	20. 15a.	<b>Φ</b>	459.00
		Health ins		15a. 15b.	*	564.00
		Vehicle in		15c.	·	180.00
			urance. Specify:	15d. 15d.		0.00
16			nance. Specify. nclude taxes deducted from your pay or included in lines 4		Ψ	0.00
	Spec	cify:		16.	\$	0.00
17.			ease payments: ents for Vehicle 1	17a.	\$	505.00
			ents for Vehicle 2	17b.	·	375.00
		Other. Sp		176. 17c.	·	0.00
		Other. Spi		176. 17d.	·	0.00
10			echy. s of alimony, maintenance, and support that you did no		Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (Official F		\$	0.00
19.			s you make to support others who do not live with you		\$	0.00
	Spec			19.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of this form	or on Schedule I: Yo	our Income.	
	20a.	Mortgages	s on other property	20a.	\$	0.00
	20b.	Real estat	te taxes	20b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
	20e.	Homeown	ner's association or condominium dues	20e.	\$	0.00
21.	Othe	r: Specify:	Son's Care	21.	+\$	1,900.00
22.	Calc	ulate your	monthly expenses			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			through 21.		\$	7,222.00
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Fo	rm 106J-2	\$	
	22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	7,222.00
23.	Calc	ulate your	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	7,310.47
	23b.	Copy your	r monthly expenses from line 22c above.	23b.	-\$	7,222.00
	23c.		our monthly expenses from your monthly income. t is your monthly net income.	23c.	\$	88.47
24.	For exmodifi	xample, do yo ication to the o.	an increase or decrease in your expenses within the you expect to finish paying for your car loan within the year or do you terms of your mortgage?			ease or decrease because of a
	□ Ye	es.	Explain here:			

Fill in this infor	mation to identify your	case:		
Debtor 1	Jon Terry Should	ers		
	First Name	Middle Name	Last Name	
Debtor 2	Corinne McRae S	houlders		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number				
(if known)				Check if this is an amended filing
If two married p You must file th	eople are filing together	r, both are equally respo le bankruptcy schedules n connection with a banl		
Sig	ın Below			
Did you pa	ay or agree to pay some	one who is NOT an atto	ney to help you fill out bankruptcy	forms?
_	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed with this	declaration and
X /s/.lor	n Terry Shoulders		X /s/ Corinne McRae S	Shoulders
Jon To	erry Shoulders		Corinne McRae Sho	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date	September 11, 2019		Date September 11	. 2019

	in this	information to identify you	r case:			
Deb	tor 1	Jon Terry Shoul				
		First Name	Middle Name	Last Name		
	tor 2 ise if, filin	Corinne McRae	Shoulders  Middle Name	Last Name		
` .		5,				
Unit	ed Stat	es Bankruptcy Court for the:	SOUTHERN DISTRICT O	OF MISSISSIPPI		
Cas	e numb	er				
(if kno						Check if this is an
					a	amended filing
Off	icial	Form 107				
			Affairs for Individ	duale Filing for F	Rankruntov	4/19
					equally responsible for sup y additional pages, write you	
		known). Answer every ques		uns form. On the top of an	y additional pages, write you	ar name and case
Dort		Sive Details About Your Ma	rital Status and Where You	Lived Peters		
Part		Sive Details About Your Ma	intai Status and Where Tou	Lived Belore		
1.	What is	s your current marital statu	is?			
	<b>-</b> M	arried				
	_	arried ot married				
	□ IN	ot mameu				
2.	During	the last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_		ived in the last 3 years. Do no	nt include where you live no	N.	
	_ '	53. List all of the places you h	ived in the last 5 years. Do no	of morade where you live not	v.	
	Debto	r 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
			lived there			nved there
					nity property state or territor	
state	s and te	<i>erritories</i> include Arizona, Ca	iliornia, idano, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	visconsin.)
	■ No	0				
	□ Ye	es. Make sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 E	Explain the Sources of You	r Income			
4.	Did vo	u have any income from en	nnlovment or from operatin	g a business during this v	ear or the two previous cale	ndar vears?
	Fill in th	ne total amount of income yo	u received from all jobs and a	all businesses, including part	-time activities.	ndar years.
	If you a	re filing a joint case and you	have income that you receive	e together, list it only once u	nder Debtor 1.	
		)				
	_	es. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Fro	n lanı	ary 1 of current year until	=	,		,
		ary 1 of current year until ou filed for bankruptcy:	■ Wages, commissions,	\$14,876.00	■ Wages, commissions,	\$20,793.32
-	- , -		bonuses, tips		bonuses, tips	
			Operating a business		Operating a business	

Official Form 107

	btor 1 btor 2	Jo Co	n Terry Sh rinne McF	oulders Rae Should	ers				Case	number (if known)		
					Debtor 1					Debtor 2		
					Sources of i			s income re deductions an sions)	nd	Sources of inco		Gross income (before deductions and exclusions)
			dar year: December	31, 2018 )	■ Wages, co			\$20,097.0	00	■ Wages, commissions, bonuses, tips		
					☐ Operating	a business				Operating a b	ousiness	
			dar year be December		■ Wages, co			\$51,534.0	00	■ Wages, common bonuses, tips	missions,	\$24,000.00
					☐ Operating	a business				☐ Operating a b	ousiness	
	List ea	ach s	•	he gross inco	ome from each  Debtor 1	source separat	tely. Do ı	not include incor		at you listed in line  Debtor 2	e 4.	
					Sources of in Describe belo		each	s income from source re deductions an sions)	nd	Sources of inco	ome	Gross income (before deductions and exclusions)
			1 of currei iled for bar	nt year until kruptcy:	Social Secu Pension	iirty &		\$17,000.0	00			
					Pension			\$17,248.0	00			
			dar year: December	31, 2018 )	Social Secu Pension	ırity &		\$46,542.0	00			
Pa	rt 3:	List	Certain Pa	yments You	Made Before	You Filed for I	Bankrup	tcy				
6.	_	<b>ither</b> No.	Neither De	ebtor 1 nor D	's debts prima Debtor 2 has po personal, fami	rimarily consu	ımer del	ots. Consumer o	debts	are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			During the No. Yes	Go to line 7	ach creditor to	whom you pai	id a total	of \$6,825* or mo	ore in		ments and th	he total amount you and alimony. Also, do
			* Subject	not include	payments to a	n attorney for th	his bankı	uptcy case.		or after the date of		•
	<b>■</b> \	Yes.			or both have poor ore you filed for	•			total	of \$600 or more?		
			□ No.	Go to line 7								
			■ Yes	include pay		estic support ol				the total amount y ort and alimony. A		t creditor. Do not nclude payments to an
	Creditor's Name and Address					ates of payme	ent	Total amount		Amount you still owe	Was this p	payment for

Del	otor 2 Corinne McRae Shoulders		Cas	e number (if known)							
	Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this pa	syment for					
		zaioc oi payiiioiii	paid	still owe	, , ,	.,					
	Credit Acceptance		\$1,516.05	\$13,000.00	☐ Mortgage	e					
	P.O. Box 551888 Detroit, MI 48255				■ Car						
	Detroit, Wii 40233				☐ Credit Ca						
					Loan Rep	•					
					Suppliers	s or vendors					
					Other						
	CPS		\$115.00	\$14,432.05	☐ Mortgage	<del>j</del>					
	P.O. Box 98774		•	•	■ Car						
	Phoenix, AZ 85038				☐ Credit Ca	ard					
					☐ Loan Rep						
					☐ Suppliers	s or vendors					
					Other						
	Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.  No  Yes. List all payments to an insider.	control, or owner of 20% of	or more of their voting	securities; and a	ny managing a	gent, including one fo					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment					
			paid	still owe							
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.										
	include payments on debts guaranteed or cos	igned by an insider.									
	■ No										
	☐ Yes. List all payments to an insider										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment					
			paid	Still Owe	include cred	iiloi 3 Hairie					
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures									
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.										
	■ No □ Yes. Fill in the details.										
	Case title	Nature of the case	Court or agency		Status of th	ne case					
	Case number		,								
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?					
	No. Go to line 11.										
	Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the					
	C. Santoi Haine and Addiess			Date		property					
		Explain what happened	d								

Debtor 1 Jon Terry Shoulders

Debto	Corinne McRae Shoulders		Case number	(if known)	
C	Creditor Name and Address	De	escribe the Property	Date	Value of the property
		Ex	plain what happened		1 11 3
A	Audi Financial Services	Aı	udi Q3	10/17	Unknown
			Property was repossessed.		
			Property was foreclosed.		
			Property was garnished.		
			Property was attached, seized or levied.		
	fithin 90 days before you filed for ban ecounts or refuse to make a payment No		did any creditor, including a bank or financial in e you owed a debt?	stitution, set off any	amounts from your
	Yes. Fill in the details.				
C	Creditor Name and Address	De	escribe the action the creditor took	Date action was taken	Amount
<b>Part 5</b> 3. W	List Certain Gifts and Contribution  (ithin 2 years before you filed for ban No		did you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.				
	Sifts with a total value of more than \$ per person	600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift ar Address:	nd			
4. <b>W</b>	ithin 2 years before you filed for ban	kruptcy,	did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	No				
	Yes. Fill in the details for each gift or	r contribu	tion.		
n	Gifts or contributions to charities that nore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates you contributed	Value
Part 6		,			
5. <b>W</b>	ithin 1 year before you filed for bank gambling?	ruptcy oi	r since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster
-	No Yes. Fill in the details.				
	i co. i iii iii tilo dotallo.	Dage	ibe any insurance coverage for the loss	Date of your	Value of property
	Describe the property you lost and now the loss occurred		•	Date of your loss	Value of property lost
-			e the amount that insurance has paid. List pending nce claims on line 33 of <i>Schedule A/B: Property.</i>		

	otor 1 otor 2	Jon Terry Shoulders Corinne McRae Shoulders			Ca	ase numbe	er (if known)	
Par	t 7:	List Certain Payments or Transfers						
16.	consu	n 1 year before you filed for bankruptcy ilted about seeking bankruptcy or prep e any attorneys, bankruptcy petition prep	oarin	g a bankruptcy per	tition?			rty to anyone you
	_	No Yes. Fill in the details.						
	Addr Emai	on Who Was Paid ess I or website address on Who Made the Payment, if Not You		Description and variansferred	alue of any prope	rty	Date payment or transfer was made	Amount o paymen
	P.O. Jack	en N. Shaffer Box 1177 Ison, MS 39215 Iffer#eshaffer-law.com						\$1,000.00
17.	promi Do no	n 1 year before you filed for bankruptcy sed to help you deal with your crediton to include any payment or transfer that you ho	rs or	to make payments			or transfer any prope	rty to anyone who
	`	es. Fill in the details.						
	Person Who Was Paid Address			Description and value of any property transferred			Date payment or transfer was made	Amount o paymen
	transf Includinclud	n 2 years before you filed for bankruptor erred in the ordinary course of your be both outright transfers and transfers made gifts and transfers that you have alread to	u <b>sine</b> ade a	ess or financial affa s security (such as	airs? the granting of a sec			
		es. Fill in the details.  on Who Received Transfer  ess		Description and v		paymen	e any property or ts received or debts exchange	Date transfer was made
	Pers	on's relationship to you						
19.	benef	n 10 years before you filed for bankrup iciary? (These are often called asset-pro	tcy, tectio	did you transfer ar on devices.)	y property to a sel	f-settled t	trust or similar device	of which you are a
		'es. Fill in the details.		5				5
	Name	e of trust		Description and v	alue of the proper	ty transte	rred	Date Transfer was made
Par	t 8:	List of Certain Financial Accounts, Ins	strun	nents, Safe Deposi	t Boxes, and Stora	ge Units		
20.	sold, Include house	n 1 year before you filed for bankruptcy moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, assoc do	r oth	er financial accou	nts; certificates of			
	Y	es. Fill in the details.						
		e of Financial Institution and ess (Number, Street, City, State and ZIP		t 4 digits of ount number	Type of account instrument	c n	Date account was closed, sold, noved, or ransferred	Last balance before closing o transfe

	rebtor 1 Jon Terry Shoulders rebtor 2 Corinne McRae Shoulders				Case number (if known)			
		Financial Institution and Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
	Regions		XXXX-	■ Checking □ Savings □ Money Marl □ Brokerage □ Other	ket	10/18	\$0.00	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No □ Yes. F	Fill in the details.						
		Financial Institution Number, Street, City, State and ZIP Code)	Who else had a Address (Number State and ZIP Code	er, Street, City,	Describe	the contents	Do you still have it?	
22.								
	Name of S	Storage Facility Number, Street, City, State and ZIP Code)	Who else has of to it? Address (Number State and ZIP Code	er, Street, City,	Describe	the contents	Do you still have it?	
		tify Property You Hold or Control		adudo any proport	hy vou bor	rowed from are storing	for or hold in truct	
23.	for someo	ld or control any property that sone.	omeone eise owns? ii	icidde any propert	ly you bon	owed from, are storing	ior, or note in trust	
	■ No □ Yes.	Fill in the details.						
	Owner's N Address (	Name Number, Street, City, State and ZIP Code)	Where is the p (Number, Street, Circode)		Describe	the property	Value	
Pa	rt 10: Give	t 10: Give Details About Environmental Information						
For	the purpos	e of Part 10, the following definit	ions apply:					
	toxic subs	ental law means any federal, stat tances, wastes, or material into s controlling the cleanup of thes	the air, land, soil, surf	ace water, ground				
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
		s material means anything an en material, pollutant, contaminan		es as a hazardous	waste, ha	zardous substance, tox	ic substance,	
Rep	ort all notic	es, releases, and proceedings the	nat you know about, r	egardless of when	they occu	ırred.		
24.	Has any go	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. F	- Fill in the details.						
	Name of s Address (	site Number, Street, City, State and ZIP Code)	Governmental Address (Number	unit er, Street, City, State and		onmental law, if you it	Date of notice	

	tor 2 Corinne McRae Shoulders	Case number (if known)						
25.	Have you notified any governmental unit of any release of hazardous material?							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	Part 11: Give Details About Your Business or Connections to Any Business							
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have any	of the following connections to any	business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability compa	any (LLC) or limited liability partnership	o (LLP)					
☐ A partner in a partnership								
	☐ An officer, director, or managing exe	cutive of a corporation						
☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.							
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper						
20	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial							
20.	institutions, creditors, or other parties.	y, did you give a illiancial statement to	o anyone about your business? incid	ide all Illialicial				
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Debtor 2	Corinne McRae Shoulders		Case number (if known)		
Part 12:	Sign Below				
are true ar with a ban		atement,	d any attachments, and I declare under penalty of perjury that the answers concealing property, or obtaining money or property by fraud in connection risonment for up to 20 years, or both.		
/s/ Jon T	erry Shoulders	/s/ Cor	rinne McRae Shoulders		
Jon Terr	y Shoulders	Corinne McRae Shoulders			
Signature of Debtor 1		Signature of Debtor 2			
Date Se	eptember 11, 2019	Date	September 11, 2019		
Did you at ■ No □ Yes	tach additional pages to Your Statement of Fi	nancial A	ffairs for Individuals Filing for Bankruptcy (Official Form 107)?		
Did you pa	ay or agree to pay someone who is not an atto	rney to h	elp you fill out bankruptcy forms?		
☐ Yes. Na	ame of Person Attach the Bankruptcy Pet	ition Prep	arer's Notice, Declaration, and Signature (Official Form 119).		

Fill in this infor	mation to identify your case:			
Debtor 1	Jon Terry Shoulders	erry Shoulders		
Debtor 2	First Name Middle Name	Last Name		
(Spouse if, filing)	Corinne McRae Shoulders First Name Middle Name	Last Name		
United States Ba	ankruptcy Court for the: SOUTHERN DIS	STRICT OF MISSISSIPPI		
Case number				
(if known)			☐ Check if this is an amended filing	
	nt of Intention for Indiv	viduals Filing Under Chapter	7 12/15	
	lividual filing under chapter 7, you must fi /e claims secured by your property, or	ill out this form if:		
you have lease You must file the whiche on the	sed personal property and the lease has it is form with the court within 30 days after ever is earlier, unless the court extends the form	not expired.  r you file your bankruptcy petition or by the date set the time for cause. You must also send copies to the copies	creditors and lessors you list	
	nd date the form.			
write y	and accurate as possible. If more space i your name and case number (if known).  Your Creditors Who Have Secured Claims	is needed, attach a separate sheet to this form. On th	e top of any additional pages,	
		D: Creditors Who Have Claims Secured by Property (	Official Form 106D), fill in the	
information b Identify the cr	elow. reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
		_	_	
Creditor's ( name:	CPS	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of	f 2010 Honda Accura RL 105,000 miles	■ Retain the property and enter into a  Reaffirmation Agreement.  □ Retain the property and [explain]:	■ Yes	
securing debt	:			
Creditor's (	Credit Acceptance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of	f 2015 Honda Accord 41,000	Retain the property and enter into a	■ Yes	
property securing debt	miles	Reaffirmation Agreement.  Retain the property and [explain]:		
Creditor's F	Regions	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
Description of	Residence 112 Annandale Pkwy E Madison, MS 39110 Madison	Retain the property and enter into a Reaffirmation Agreement.	■ Yes	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	Jon Terry Shoulders Corinne McRae Shoulders	Case number (if known)	
property securing		☐ Retain the property and [explain]:	-
Creditor name:	's Specialized Loan Serv.	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a	□ No ■ Yes
Descript property securing	E Madison, MS 39110 Madison	<ul> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	-
For any un in the infor	mation below. Do not list real estate leases. Ur	in Schedule G: Executory Contracts and Unexpired nexpired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)(2)	lease period has not yet ended.
Describe y	your unexpired personal property leases		Will the lease be assumed?
Lessor's na			□ No
Property:			☐ Yes
Lessor's na			□ No
Property:	Torrodoca		☐ Yes
Lessor's na			□ No
Property:	Torrodoca		☐ Yes
Lessor's na			□ No
Property:	Torrodoca		☐ Yes
Lessor's na			□ No
Property:	Torrodoca		☐ Yes
Lessor's na			□ No
Property:	1 01 100000		☐ Yes
Lessor's na			□ No
Property:	101104004		☐ Yes

Debtor 1 Debtor 2	•	Case number (if known)
Part 3:	Sign Below	
•	nalty of perjury, I declare that I have indicated that is subject to an unexpired lease.	I my intention about any property of my estate that secures a debt and any personal
χ /s/	Jon Terry Shoulders	X /s/ Corinne McRae Shoulders
Joi	n Terry Shoulders	Corinne McRae Shoulders
Sig	nature of Debtor 1	Signature of Debtor 2
Dat	e September 11, 2019	Date September 11, 2019

Fill i	n this infor	mation to identify your case:		Ch	eck one box	only as d	irected	in this form and	in Form
Deb	tor 1	Jon Terry Shoulders		122	2A-1Supp:				
Deb	tor 2	Corinne McRae Shoulders			☐ 1. There i	s no pres	umption	n of abuse	
(Spou	ise, if filing)				_	·	·		
Unite	ed States E	Bankruptcy Court for the: Southern District o	f Mississippi	'	applies	s will be n	nade un	mine if a presum ider <i>Chapter 7 M</i>	•
Case	e number				Calcul	ation (Off	icial Fo	m 122A-2).	
(if kno	own)							ot apply now bed but it could app	
					☐ Check if	this is a	n ame	nded filing	
Off	icial F	orm 122A - 1						J	
		7 Statement of Your Cur	rent Moi	nthly Inc	ome				12/15
attach case i qualif Part	n a separate number (if I iying militar	and accurate as possible. If two married people as sheet to this form. Include the line number to we known). If you believe that you are exempted from y service, complete and file Statement of Exempliculate Your Current Monthly Income	hich the addition n a presumption tion from Presu	nal information a of abuse becau	applies. On th se you do no	e top of a	ny additi narily co	ional pages, write onsumer debts or	your name and because of
•	_	arried. Fill out Column A, lines 2-11.	.,,.						
		d and your spouse is filing with you. Fill ou	t hoth Columns	: A and B lines	2-11				
	_	d and your spouse is NOT filing with you.		•	2-11.				
	_	ng in the same household and are not lega	•	•	lumne A and	R lines	0 11		
	_	ng separately or are legally separated. Fill o	• •			•		ng this hov you	declare under
	per	nalty of perjury that you and your spouse are leading apart for reasons that do not include evading	egally separated	d under nonban	kruptcy law	that appli	es or the		
10 th	01(10A). For e 6 months,	erage monthly income that you received from all sexample, if you are filing on September 15, the 6-me add the income for all 6 months and divide the total the same rental property, put the income from that property.	onth period would by 6. Fill in the re	be March 1 throusult. Do not include	ugh August 31 de any income	. If the amo amount m	ount of your	our monthly income once. For example	e varied during e, if both
					Column A Debtor 1			nn B or 2 or filing spouse	
2.		ss wages, salary, tips, bonuses, overtime, a	and commission	ons (before all	\$ 1,8	363.24	\$	2,411.97	
3	payroll de	auctions).  and maintenance payments. Do not include	navments from	a snouse if	Ψ		Ψ		
Э.		is filled in.	payments nom	a spouse ii	\$	0.00	\$	0.00	
4.	of you or from an u	nts from any source which are regularly pa your dependents, including child support. nmarried partner, members of your household mates. Include regular contributions from a sp o not include payments you listed on line 3.	Include regular, your depende	r contributions nts, parents,	\$	0.00	\$	0.00	
5.	Net incor	ne from operating a business, profession, o							
				otor 1					
	Gross rec	eipts (before all deductions)	\$ 0.00						
	•	and necessary operating expenses	-\$ 0.00	Conv horo	¢.	0.00	¢	0.00	
		nly income from a business, profession, or farr	n \$	Copy here ->	Φ	0.00	\$	0.00	
6.	Net Incor	ne from rental and other real property	Deh	otor 1					
	Gross ros	eipts (before all deductions)	\$ 0.00						
		and necessary operating expenses	-\$ 0.00						
	•	nly income from rental or other real property	*	Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

0.00

0.00

Debtor 1 Debtor 2		ry Shoulders McRae Shoulders			Case r	number ( <i>if known</i> )			
					Colum Debto		Column B Debtor 2 or non-filing s		
8. <b>U</b> r	nemployme	nt compensation			\$	0.00	\$	0.00	
		ne amount if you contend that the amount urity Act. Instead, list it here:	received was a be	nefit under					
	For you	\$		0.00					
	For your spo	ouse\$		0.00					
		<b>tirement income.</b> Do not include any am he Social Security Act.	ount received that	was a	\$	2,156.07	\$	0.00	
Do red do	not include ceived as a v	all other sources not listed above. Spe any benefits received under the Social S victim of a war crime, a crime against hur rism. If necessary, list other sources on a	security Act or paym nanity, or internation	nents nal or	\$	0.00	¢	0.00	
	•				Φ	0.00	\$ \$	0.00	
	Total	amounts from separate pages, if any.			Ψ	0.00	\$ \$	0.00	
	ich column.	r total current monthly income. Add lin Then add the total for Column A to the to  ine Whether the Means Test Applies to	al for Column B.	\$	4,019.3	31 + \$ _	2,411.97	Total crincome	urrent monthly
12. <b>C</b> a	alculate you	r current monthly income for the year.	Follow these steps	3:					
12	a. Copy you	r total current monthly income from line 1	1			Copy line 11	here=>	\$	6,431.28
	Multiply b	y 12 (the number of months in a year)						x 1	2
12	b. The resul	t is your annual income for this part of the	e form				12b.	\$7	77,175.36
13. <b>C</b> a	alculate the	median family income that applies to	ou. Follow these s	steps:					
Fil	I in the state	in which you live.	MS						
Fil	I in the numb	per of people in your household.	2						
To	find a list of	an family income for your state and size applicable median income amounts, go his list may also be available at the bank	online using the line				13. ctions	\$5	52,837.00
14. <b>H</b> c	ow do the lii	nes compare?							
14		ne 12b is less than or equal to line 13. O o to Part 3.	n the top of page 1,	check box	1, Ther	re is no presun	nption of abuse	).	
14	b. 🔳 Li	ne 12b is more than line 13. On the top oo to Part 3 and fill out Form 122A-2.	f page 1, check box	x 2, The pre	esumpti	on of abuse is	determined by	Form 12	22A-2.

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Corinne McRae Shoulders	Case number (if known)
Sign Below	
By signing here, I declare under penalty of perjo	ury that the information on this statement and in any attachments is true and correct.
/s/ Jon Terry Shoulders	X /s/ Corinne McRae Shoulders
Jon Terry Shoulders	Corinne McRae Shoulders
Signature of Debtor 1	Signature of Debtor 2
September 11, 2019	Date September 11, 2019
MM/DD/YYYY	MM/DD/YYYY
you checked line 14a, do NOT fill out or file F	orm 122A-2.
you checked line 14b, fill out Form 122A-2 an	d file it with this form.
3	Sign Below  y signing here, I declare under penalty of perjute  /s/ Jon Terry Shoulders  Jon Terry Shoulders  Signature of Debtor 1  September 11, 2019  MM / DD / YYYY  you checked line 14a, do NOT fill out or file Fe

Debtor 1 Debtor 2 Debtor 2 Don Terry Shoulders
Corinne McRae Shoulders
Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 03/01/2019 to 08/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment

Income by Month:

6 Months Ago:	03/2019	\$2,246.66
5 Months Ago:	04/2019	\$1,371.63
4 Months Ago:	05/2019	\$1,514.16
3 Months Ago:	06/2019	\$1,273.75
2 Months Ago:	07/2019	\$2,912.95
Last Month:	08/2019	\$1,860.28
	Average per month:	\$1,863.24

#### Line 9 - Pension and retirement income

Source of Income: **Pension** 

Income by Month:

6 Months Ago:	03/2019	\$2,156.07
5 Months Ago:	04/2019	\$2,156.07
4 Months Ago:	05/2019	\$2,156.07
3 Months Ago:	06/2019	\$2,156.07
2 Months Ago:	07/2019	\$2,156.07
Last Month:	08/2019	\$2,156.07
	Average per month:	\$2,156.07

	Corinne McRae Shoulders	Case number (if known)	
Debioi 2	Confine wichae Shoulders	Case number (ii known)	

#### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 03/01/2019 to 08/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment** 

Income by Month:

6 Months Ago:	03/2019	\$2,045.31
5 Months Ago:	04/2019	\$2,341.50
4 Months Ago:	05/2019	\$2,563.44
3 Months Ago:	06/2019	\$2,619.18
2 Months Ago:	07/2019	\$2,884.88
Last Month:	08/2019	\$2,017.50
	Average per month:	\$2,411.97

Fill in this info	ormation to identify your case:	Check the appropriate box as directe
Debtor 1	Jon Terry Shoulders	lines 40 or 42:
Debtor 2	Corinne McRae Shoulders	According to the calculations required by Statement:
(Spouse, if filin United States I	ng)  Bankruptcy Court for the: Southern District of Mississippi	■ 1. There is no presumption of abuse
Case number (if known)		☐ 2. There is a presumption of abuse.
Official F	form 122Δ - 2	☐ Check if this is an amended filing

#### **Chapter 7 Means Test Calculation**

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Determine Your Adjusted Income					
1.	Copy your total current monthly income. Copy	line 11 from Official F	orm 122 <i>A</i>	\-1 here=>	\$	6,431.28
2.	Did you fill out Column B in Part 1 of Form 122A-1?  ☐ No. Fill in \$0 for the total on line 3.  ☐ Yes. Is your spouse Filing with you?  ☐ No. Go to line 3.  ☐ Yes. Fill in \$0 the total on line 3.					
3.	Adjust your current monthly income by subtracting any part of household expenses of you or your dependents. Follow these so On line 11, Column B of Form 122A–1, was any amount of the incoexpenses of you or your dependents?  No. Fill in 0 for the total on line 3.  Yes. Fill in the information below:	teps:			ed for the	household
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax de support other than you or your dependents.			om		
	Total.	\$	0.00	0		
4.	Adjust your current monthly income. Subtract line 3 from line 1.			Copy total here	=> <b>-</b> \$	6,431.28

The Interr to answer instruction Deduct the your actual income in If your exp Whenever  5. The r Fill in plus to the notes of the notes of the condition of the	calculate Your Deductions from Your Income  nal Revenue Service (IRS) issues National and Leter the questions in lines 6-15. To find the IRS states for this form. This information may also be a see expense amounts set out in lines 6-15 regardless all expenses if they are higher than the standards. Do line 3 and do not deduct any operating expenses the openses differ from month to month, enter the average of this part of the from refers to you, it means both you number of people used in determining your ded to the number of people who could be claimed as except the number of any additional dependents whom you number of people in your household.  Standards  You must use the IRS National	of your actual exponds your actual exponds your actual exponds you subtracted a expense.  Sou and your spous your actions from incomptions on your usupport. This nutrice and the property of	e using the link specified in the ankruptcy clerk's office.  Dense. In later parts of the form, amounts that you subtracted from in income in lines 5 and 6 are if Column B of Form 122A-1 if the come in the come in lines 5 and 6 are if Column B of Form 122A-1 if the come in lines 6 are income tax return, and income tax return, and income in the come in the come in the come in the column between the column betw	ne separate  you will use some of your spouse's of form 122A-1.
to answer instructio  Deduct the your actual income in  If your exp  Whenever  5. The r  Fill in plus to the not  National S  6. Food Stand	rethe questions in lines 6-15. To find the IRS stars for this form. This information may also be a see expense amounts set out in lines 6-15 regardless all expenses if they are higher than the standards. Dolline 3 and do not deduct any operating expenses the penses differ from month to month, enter the average of this part of the from refers to you, it means both you number of people used in determining your deduction the number of people who could be claimed as existent number of any additional dependents whom you number of people in your household.	of your actual exponds your actual exponds your actual exponds you subtracted a expense.  Sou and your spous your actions from incomptions on your usupport. This nutrice and the property of	e using the link specified in the ankruptcy clerk's office.  Dense. In later parts of the form, amounts that you subtracted from in income in lines 5 and 6 are if Column B of Form 122A-1 if the come in the come in lines 5 and 6 are if Column B of Form 122A-1 if the come in lines 6 are income tax return, and income tax return, and income in the come in the come in the come in the column between the column betw	ne separate  you will use some of your spouse's of form 122A-1.  s filled in.
your actual income in  If your exp  Whenever  5. The r  Fill in plus t the not  National \$  6. Food Stand  7. Out-c	al expenses if they are higher than the standards. D line 3 and do not deduct any operating expenses the penses differ from month to month, enter the average of this part of the from refers to <i>you</i> , it means both you number of people used in determining your ded in the number of people who could be claimed as extended the the number of any additional dependents whom you number of people in your household.	o not deduct any nat you subtracted ge expense. Ou and your spous ductions from incomptions on your a support. This not	amounts that you subtracted from in income in lines 5 and 6 e if Column B of Form 122A-1 i  ome federal income tax return, mber may be different from	your spouse's of form 122A-1. s filled in.
Whenever  5. The r  Fill in plus t the not the	r this part of the from refers to <i>you</i> , it means both you number of people used in determining your ded the number of people who could be claimed as extending the number of any additional dependents whom you number of people in your household.	ou and your spous uctions from inc emptions on your u support. This nu	ome federal income tax return, mber may be different from	
<ul> <li>5. The r</li> <li>Fill in plus t the no</li> <li>National \$</li> <li>6. Food Stand</li> <li>7. Out-c</li> </ul>	number of people used in determining your ded in the number of people who could be claimed as exit the number of any additional dependents whom you number of people in your household.	uctions from inc emptions on your u support. This nu	ome federal income tax return, mber may be different from	
Fill in plus to the note that	n the number of people who could be claimed as exe the number of any additional dependents whom you umber of people in your household.	emptions on your u support. This nu	federal income tax return, mber may be different from	2
National S  6. Food Stand  7. Out-c	the number of any additional dependents whom you umber of people in your household.	u support. This nu	mber may be different from	2
<ol> <li>Food Stand</li> <li>Out-o</li> </ol>	Standards You must use the IRS National	l Standards to ans	swer the questions in lines 6-7.	
7. <b>Out-</b> 0				
	d, clothing, and other items: Using the number of dards, fill in the dollar amount for food, clothing, and		ed in line 5 and the IRS Nationa	\$1,288.0
peopl	of-pocket health care allowance: Using the numb lollar amount for out-of-pocket health care. The numble who are 65 or olderbecause older people have er than this IRS amount, you may deduct the addition	nber of people is a higher IRS allow	plit into two categoriespeople wance for health care costs. If y	who are under 65 and
People wi	ho are under 65 years of age			
7a. (	Out-of-pocket health care allowance per person	\$ 55.0	0_	
7b.	Number of people who are under 65	X2		
7c.	Subtotal. Multiply line 7a by line 7b.	\$110.0	O Copy here=> \$	110.00
People wh	ho are 65 years of age or older			
7d.	Out-of-pocket health care allowance per person	\$ 114.0	0_	
7e.	Number of people who are 65 or older	X0		
7f.	Subtotal. Multiply line 7d by line 7e.	\$0.0	Copy here=> +\$	0.00
7g.	T <b>otal.</b> Add line 7c and line 7f		\$110.00	\$ 110.00

ebtor ebtor			AcRae Shoulders			Case number	(if known)				
Lo	cal S	Standards	You must use the IRS Local Standards to a	inswer the	questions in lin	es 8-15.					
			tion from the IRS, the U.S. Trustee Progra ses into two parts:	ım has div	ided the IRS L	ocal Stand	ard for h	nousing	g for		
_		•	tilities - Insurance and operating expense tilities - Mortgage or rent expenses	s							
То	ans	wer the qu	estions in lines 8-9, use the U.S. Trustee F	Program c	hart.						
			o online using the link specified in the separa be available at the bankruptcy clerk's office.		ons for this for	m.					
8.			utilities - Insurance and operating expens mount listed for your county for insurance and						s, fill \$		541.00
9.	Н	ousing and	utilities - Mortgage or rent expenses:								
	9a		e number of people you entered in line 5, fill i your county for mortgage or rent expenses				\$	1,2	37.00		
	9b	Total average monthly payment for all mortgages and other debts secured by your home.									
		contractu	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.								
		Name of	the creditor	Averaç payme	ge monthly ent						
		Region	s	\$	208.24						
		Special	lized Loan Serv.	\$	1,428.68						
			Total average monthly payment	\$	1,636.92	Copy here=>	-\$	1,	636.92	Repeat this amount on line 33a.	
	90	c. Net mort	gage or rent expense.								
			line 9b (total average monthly payment) from xpense). If this amount is less than \$0, enter			\$		0.00	Copy here=>	\$	0.00
10.			hat the U.S. Trustee Program's division of alculation of your monthly expenses, fill in				g is inco	orrect a	and	\$	0.00
	E	Explain why:									
11.	Lo	ocal transp	ortation expenses: Check the number of vel	hicles for w	vhich you claim	an ownersh	nip or ope	erating	expense		
		<b>l</b> 0. Go to lin	ne 14.								
		l 1. Go to lin	ne 12.								
		2 or more.	Go to line 12.								

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

420.00

ebtor 1 ebtor 2		Ferry Shoulders nne McRae Shoulders			Case numbe	r ( <i>if known</i> )		
13.	You may	ownership or lease expense: Using the IRS Local or not claim the expense if you do not make any loan or two vehicles.						
Vel	hicle 1	Describe Vehicle 1: 2015 Honda Accord 41	,000 miles					
13a.	Ownersh	nip or leasing costs using IRS Local Standard			\$	508.00		
13b.	Average	monthly payment for all debts secured by Vehicle 1.						
	Do not in	nclude costs for leased vehicles.						
	are conti	late the average monthly payment here and on line fractually due to each secured creditor in the 60 mont cy. Then divide by 60.			t			
	Nar	me of each creditor for Vehicle 1	Average n	nonthly				
	Cre	edit Acceptance	\$	218.99				
		Total Average Monthly Payment	\$	218.99	Copy here =>	-\$ <b>218</b>	Repeat this amount on line 33b.	
	Subtract	cle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0,	, enter \$0		\$	289.01	Copy net Vehicle 1 expense here => \$	289.01
vei	hicle 2	Describe Vehicle 2: 2010 Honda Accura RL	105,000 m	niles				
13d.	Ownersh	nip or leasing costs using IRS Local Standard			\$	508.00		
13e.	Average leased v	monthly payment for all debts secured by Vehicle 2. ehicles.	Do not inclu	ide costs fo	r			
	Nar	ne of each creditor for Vehicle 2	Average n	nonthly				
	СР	S	\$	243.75				
		Total Average Monthly Payment	\$	243.75	Copy here => -\$	243.7	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease expense line 13e from line 13d. if this amount is less than \$0,	, enter \$0		\$	264.25	Copy net Vehicle 2 expense here => \$	264.25
14.		ransportation expense: If you claimed 0 vehicles in rtation expense allowance regardless of whether you				dards, fill in the I	Public \$	0.00
15.	also ded	nal public transportation expense: If you claimed 1 uct a public transportation expense, you may fill in we more than the IRS Local Standard for <i>Public Trans</i>	hat you belie					0.00

Debtor 1 Debtor 2

Debtor 1 Debtor 2 Debtor 2 December (if known)

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses	for	
	the following IRS categories.		
16.	<b>Taxes:</b> The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxes.	\$	1,296.38
17.	<b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	<b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total monthly amount that you pay for education that is either required:  as a condition for your job, or		
	■ for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	<b>Optional telephone and telephone services:</b> The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.		
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$	4,208.64

Debtor 1 Debtor 2 Debtor 2 December (if known)

Add	itional	Expense Deductions These are	additional de	eduction	ns allowed by th	e Means Test.		
		Note: Do	not include ar	ny expe	nse allowances	listed in lines 6-24.		
25.	<ul> <li>Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.</li> <li>Health insurance</li> </ul> \$171.00						or	
	Disabi	lity insurance		\$	0.00			
	Health	savings account	•	+ \$	0.00			
	Total			\$	171.00	Copy total here=>	\$	171.00
	Do you	actually spend this total amount?				•		
		No. How much do you actually spe	nd?	\$				
26.	Continuous hour h	nued contributions to the care of I	essary care a ate family who	family and suppose is una	port of an elderl ble to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 19A(b).	\$	1,900.00
27.		ction against family violence. The of you and your family under the Fa				nses that you incur to maintain the es Act or other federal laws that apply.		
	By law	, the court must keep the nature of t	nese expense	es confic	dential.		\$	0.00
28.	8. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.							
		believe that you have home energy of fill in the excess amount of home e		more th	an the home er	nergy costs included in expenses on line	•	
		ust give your case trustee document t claimed is reasonable and necess		actual e	expenses, and y	ou must show that the additional	\$	0.00
29.	\$170.8	ntion expenses for dependent chilo 33* per child) that you pay for your de elementary or secondary school.				e monthly expenses (not more than han 18 years old to attend a private or		
		ust give your case trustee documen d is reasonable and necessary and						
	* Subje	ect to adjustment on 4/01/22, and ev	ery 3 years af	fter that	for cases begu	n on or after the date of adjustment.	\$	0.00
30.	higher	onal food and clothing expense. The than the combined food and clothing of the food and clothing allowance.	g allowances i	in the IR	RS National Sta	ctual food and clothing expenses are ndards. That amount cannot be more		
		a chart showing the maximum additions for this form. This chart may al			•	•		
	You m	ust show that the additional amount	claimed is rea	asonable	e and necessar	y.	\$	0.00
31.		nuing charitable contributions. The nents to a religious or charitable organizations.				ntribute in the form of cash or financial	+\$	0.00
32.		II of the additional expense deductions 25 through 31.	tions.				\$	2,071.00

Debtor 1 Debtor 2 December 2 December 2 December 2 December 3 December 3 December 4 Dece

Dedu	ctions for Debt Payment					
	or debts that are secured by an inter ans, and other secured debt, fill in li	est in property that you own, including hon nes 33a through 33e.	ne morto	gages, vehicle		
	o calculate the total average monthly paeditor in the 60 months after you file fo	ayment, add all amounts that are contractually r bankruptcy. Then divide by 60.	due to e	ach secured		
	Mortgages on your home:					verage monthly ayment
33a.	Copy line 9b here				=> \$	1,636.92
	Loans on your first two vehicles:					
33b.	Copy line 13b here				=> \$	218.99
33c.	Copy line 13e here				=> \$	243.75
33d.	List other secured debts:					
Name	of each creditor for other secured debt	Identify property that secures the debt		Does paymen include taxes insurance?		
				□ No		
	-NONE-			☐ Yes	\$	
-				-	•	
				□ No		
-				□ Yes	\$	
				□ No		
				☐ Yes	+\$	
-						
					Copy	
33e.	Total average monthly payment. Add	ines 33a through 33d	\$	2,099.66	here=>	\$ 2,099.66
		B secured by your primary residence, a vehi support or the support of your dependents?				
	Yes. State any amount that you mu	st pay to a creditor, in addition to the payments ssion of your property (called the <i>cure amount</i> e information below.				
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount
-NO	NE-		\$		÷ 60 = \$	
					Сору	
		Tot	tal \$	0.00	total here=>	\$ 0.00
		ns a priority tax, child support, or alimony - ur bankruptcy case? 11 U.S.C. § 507.	that			
	No. Go to line 36.	. ,				
	•	these priority claims. Do not include current or s those you listed in line 19.	r			
	Total amount of all past-due		\$	162,636.26	÷ 60 =	\$ 2,710.60

	Jon Terry Shoulders Corinne McRae Shoulders		Case n	umber ( <i>if known</i> )		
For r	you eligible to file a case under Chapter 13? 11 U.S.C. § more information, go online using the link for <i>Bankruptcy Basuctions</i> for this form. <i>Bankruptcy Basics</i> may also be availab	s <i>ics</i> specified				
	No. Go to line 37.					
□ Y	Yes. Fill in the following information.					
	Projected monthly plan payment if you were filing under	er Chapter 13	\$			
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	listricts in Ala				
	To find a list of district multipliers that includes your dis the link specified in the separate instructions for this fo be available at the bankruptcy clerk's office.				Cop	oy total
	Average monthly administrative expense if you were file	ling under Ch	apter 13	\$		e=> \$
	d all of the deductions for debt payment. d lines 33e through 36.					\$4,810.26
Total De	eductions from Income					
38. <b>Add</b>	all of the allowed deductions.					
	by line 24, All of the expenses allowed under IRS bense allowances	\$	4,208.64			
Cop	by line 32, All of the additional expense deductions	\$	2,071.00			
Cop	by line 37, All of the deductions for debt payment	+\$	4,810.26	$\neg$		
	Total deductions	\$	11,089.90	Copy total	here=	=> \$11,089.90
Part 3:	Determine Whether There is a Presumption of Abuse					
39. Calc	ulate monthly disposable income for 60 months					
39a	a. Copy line 4, adjusted current monthly income	\$	6,431.28			
39b	o. Copy line 38, Total deductions	-\$	11,089.90			
390	c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Subtract line 39b from line 39a	\$	-4,658.62	Copy here=>\$		4,658.62
For	the next 60 months (5 years)				x 60	
<b>3</b> 9d	d. <b>Total.</b> Multiply line 39c by 60		\$279	9,517.20	Copy here=>	\$
40. <b>Find</b>	out whether there is a presumption of abuse. Check the	box that app	lies:		J	
■ т	The line 39d is less than \$8,175*. On the top of page 1 of the	nis form, ched	ck box 1, There	e is no presui	nption of a	buse. Go to Part 5.
	Fhe line 39d is more than \$13,650*. On the top of page 1 or Part 4 if you claim special circumstances. Go to Part 5.	f this form, ch	eck box 2, The	ere is a presı	ımption of a	abuse. You may fill out
П 1	The line 39d is at least \$8,175*, but not more than \$13,65	<b>0*.</b> Go to line	41.			
	eject to adjustment on 4/01/22, and every 3 years after that for			date of adju	stment.	

Debtor 1

Debtor 1 Debtor 2	Jon Cori	Terry Shoulders nne McRae Shoulders	Case number (if known)	
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled of A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	1	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)	)(I)	sopy ere=> \$
		Multiply line 41a by 0.25		
25	% of y	ne whether the income you have left over after subtracting all allowed de four unsecured, nonpriority debt. e box that applies:	eductions is enough to pay	
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5.	ere is no presumption of abus	е.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, chamption of abuse. You may fill out Part 4 if you claim special circumstances. T		
Part 4:	Giv	ve Details About Special Circumstances		
reaso	onable	we any special circumstances that justify additional expenses or adjustneral ealternative? 11 U.S.C. § 707(b)(2)(B).	nents of current monthly inc	ome for which there is no
■ N	o. Go	to Part 5.		
□ Y		I in the following information. All figures should reflect your average monthly em. You may include expenses you listed in line 25.	expense or income adjustment	for each
	ne	ou must give a detailed explanation of the special circumstances that make the cessary and reasonable. You must also give your case trustee documentation justments.		
	G	ive a detailed explanation of the special circumstances	Average monthly expense or income adjustment	
			\$	
	_		\$	-
	_	-	*	-
	_		\$ 	-
			Ψ	=

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Debtor 1 Debtor 2	Jon Terry Shoulders Corinne McRae Shoulders	Case number (if known)
Part 5:	Sign Below  By signing here. I declare under penalty of perior	ury that the information on this statement and in any attachments is true and correct.
	X /s/ Jon Terry Shoulders	χ /s/ Corinne McRae Shoulders
	Jon Terry Shoulders	Corinne McRae Shoulders
	Signature of Debtor 1	Signature of Debtor 2
Dat	te September 11, 2019	Date September 11, 2019
	MM / DD / YYYY	MM / DD / YYYY

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court Southern District of Mississippi

In	Jon Terry Shoulders  re Corinne McRae Shoulders	Jon Terry Shoulders Corinne McRae Shoulders			
		Debtor(s)	Chapter	7	
1.	DISCLOSURE OF COMPEN  Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(t			` ′	that
1.	compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy.	, or agreed to be paid	to me, for service	s rendered or to
				1,000.00	
	Prior to the filing of this statement I have received		<b>\$</b>	1,000.00	
	Balance Due		\$	0.00	
2.	\$335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mem	bers and associate	s of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				ny law firm. A
6.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspec	ts of the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. Representation of the debtor in adversary proceedings</li> <li>e. [Other provisions as needed]</li> </ul>	ment of affairs and plan which is and confirmation hearing, a	n may be required; nd any adjourned hea	-	ankruptcy;
7.	By agreement with the debtor(s), the above-disclosed fee	does not include the following	g service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	payment to me for i	representation of th	ne debtor(s) in
	September 11, 2019	/s/ EILEEN N. SH	AFFER		
	Date	<b>EILEEN N. SHAF</b>	FER		
		Signature of Attorne ATTORNEY AT L			
		P O BOX 1177	2045 4477		
		JACKSON, MS 39 (601) 969-3006 F	9215-1177 Fax: (601) 949-400	2	
		èshaffer@eshaff		<del>-</del> 	
		Name of law firm			<del></del>